

PTO/SB/17 (10-03)
Approved for use through 07/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 55

Complete if Known

| | |
|----------------------|------------------|
| Application Number | 09/848,181 |
| Filing Date | 25 August 2000 |
| First Named Inventor | Travis Boone |
| Examiner Name | John S. Starsiak |
| Art Unit | 1753 |
| Attorney Docket No. | 045.000US |

METHOD OF PAYMENT (check all that apply)

Check Credit card Money Other None
Order

Deposit Account:

Deposit Account Number
60 2266

Deposit Account Name
ACLARA BIOSCIENCES, INC.

The Director is authorized to: (check all that apply)

- Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) during the pendency of this application
 Charge fee(s) indicated below, except for the filing fee
 to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

| Large Entity | Small Entity | Fee Description | Fee Paid |
|---------------------|---------------|------------------------|----------|
| Fee Code (\$) | Fee Code (\$) | | |
| 1001 770 | 2001 385 | Utility filing fee | |
| 1002 340 | 2002 170 | Design filing fee | |
| 1003 530 | 2003 265 | Plant filing fee | |
| 1004 770 | 2004 385 | Reissue filing fee | |
| 1005 160 | 2005 80 | Provisional filing fee | |
| SUBTOTAL (1) | | (\$ 0) | |

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

| Total Claims | -20 ** | = 0 | X | Fee from below | Fee Paid |
|--------------------|--------|-----|---|----------------|----------|
| Independent Claims | -3 ** | = 0 | X | = 0 | |
| Multiple Dependent | | | X | = 0 | |

| Large Entity | Small Entity | Fee Description |
|---------------------|---------------|--|
| Fee Code (\$) | Fee Code (\$) | |
| 1202 18 | 2202 9 | Claims in excess of 20 |
| 1201 86 | 2201 43 | Independent claims in excess of 3 |
| 1203 290 | 2203 145 | Multiple dependent claim, if not paid ** Reissue independent claims over original patent |
| 1204 86 | 2204 43 | ** Reissue claims in excess of 20 and over original patent |
| 1205 18 | 2205 9 | |
| SUBTOTAL (2) | | (\$ 0) |

*** or number previously paid, if greater; For Reissues, see above*

FEE CALCULATION (continued)

3. ADDITIONAL FEES

| Large Entity | Small Entity | Fee Description | Fee Paid |
|---------------------------|---------------|--|----------|
| Fee Code (\$) | Fee Code (\$) | | |
| 1051 130 | 2051 65 | Surcharge - late filing fee or oath | |
| 1052 50 | 2052 25 | Surcharge - late provisional filing fee or cover sheet | |
| 1053 130 | 1053 130 | Non-English specification | |
| 1812 2,520 | 1812 2,520 | For filing a request for reexamination | |
| 1804 920* | 1804 920* | Requesting publication of SIR prior to Examiner action | |
| 1805 1,840* | 1805 1,840* | Requesting publication of SIR after Examiner action | |
| 1251 110 | 2251 55 | Extension for reply within first month | 55.00 |
| 1252 420 | 2252 210 | Extension for reply within second month | |
| 1253 950 | 2253 475 | Extension for reply within third month | |
| 1254 1,480 | 2254 740 | Extension for reply within fourth month | |
| 1255 2,010 | 2255 1,005 | Extension for reply within fifth month | |
| 1401 330 | 2401 165 | Notice of Appeal | |
| 1402 330 | 2402 165 | Filing a brief in support of an appeal | |
| 1403 290 | 2403 145 | Request for oral hearing | |
| 1451 1,510 | 1451 1,510 | Petition to institute a public use proceeding | |
| 1452 110 | 2452 55 | Petition to revive – unavoidable | |
| 1453 1,330 | 2453 665 | Petition to revive – unintentional | |
| 1501 1,330 | 2501 665 | Utility issue fee (or reissue) | |
| 1502 480 | 2502 240 | Design issue fee | |
| 1503 640 | 2503 320 | Plant Issue fee | |
| 1480 130 | 1460 130 | Petitions to the Commissioner | |
| 1807 50 | 1807 50 | Processing fee under 37 CFR 1.17 (q) | |
| 1808 180 | 1806 180 | Submission of Information Disclosure Stmt | |
| | | Recording each patent assignment per property (times number of properties) | |
| 8021 40 | 8021 40 | | |
| 1809 770 | 2809 385 | Filing a submission after final rejection (37 CFR § 1.129(a)) | |
| 1810 770 | 2810 385 | For each additional invention to be examined (37 CFR § 1.129(b)) | |
| 1801 770 | 2801 385 | Request for Continued Examination (RCE) | |
| 1802 900 | 1802 900 | Request for expedited examination of a design application | |
| Other fee (specify) _____ | | | |

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ 55)

SUBMITTED BY

| | | | | | |
|-------------------|---|--------------------------------------|--------|------------------|----------------|
| Name (Print/Type) | Stephanie Macevitz | Registration No. (Attorney/Agent) | 30,285 | Telephone | (650) 210-1223 |
| Signature |  | | Date | 09 February 2004 | |

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PTO/SB/21 (08-03)

Approved for use through 07/31/2006, OMB 0651-0031

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TRANSMITTAL FORM

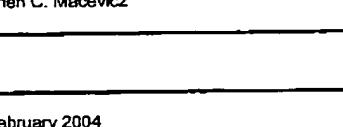
(to be used for all correspondence after initial filing)

| | |
|---|--|
| Total Number of Pages in This Submission | Application Number 09/648,181 Filing Date 25 August 2000 First Named Inventor Travis Boone Art Unit 1753 Examiner Name John S. Starsiak |
|---|--|

ENCLOSURES (check all that apply)

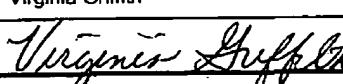
| | | |
|---|--|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ | <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) <i>(please identify below):</i> <b style="text-align: center;">Facsimile Cover Sheet |
| Remarks | | |

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

| | |
|-------------------------|---|
| Firm or Individual name | Stephen C. Macevicz |
| Signature |  |
| Date | 09 February 2004 |

CERTIFICATE OF TRANSMISSION UNDER 37 CFR 1.8

I hereby certify that this correspondence is being facsimile transmitted to the Commissioner for Patents, Facsimile Number (703) 872-9306 on the date shown below.

| | | |
|-----------------------|---|------------------|
| Typed or printed name | Virginia Griffith | Date |
| Signature |  | 09 February 2004 |

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